

GOVERNMENT OF THE DISTRICT OF COLUMBIA OFFICE OF CAMPAIGN FINANCE WASHINGTON, D.C. 20009

WASHINGTON, D.C. 20009

REPORT OF RECEIPTS AND EXPENDITURES FOR A CONSTITUENT-SERVICE PROGRAM

SUMMARY PAGE

| 1. Full Name of Constituent-Service Program Evans Constituent Service Fund | OCF Identification Number CSSCC2020008 | | |
|---|---|---|--|
| Address (Number and Street) 1350 Pennsylvania Avenue, NW,#106 | 3. Is this report an Amendment? (Yes or No) ☐ Yes ☑ No | | |
| City, State and Zip Code Washington, DC 20004 | | | |
| 4. TYPE OF REPORT: April 1st Report | | | |
| CONSTITUENT-SERVICE PROGRAM SUMMARY | COLUMN A THIS PERIOD | COLUMN B CUMULATIVE YEAR- | |
| 5. Covering Period 1/2/2018 through 4/1/2018 | IIIISTERIOD | TO-DATE | |
| 6. (a) Cash on Hand January 1 | | \$ 0.00 | |
| (b) Cash on Hand at Beginning of Reporting Period | \$ 167,716.39 | | |
| (c) Total Receipts (from Line (16)) | \$ 18,350.00 | \$ 18,350.00 | |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6 (c) for Column B) | \$ 186,066.39 | | |
| 7. Total Expenditures (from Line 24) | \$ 22,635.05 | \$ 22,635.05 | |
| 8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)] | \$ 163,431.34 | | |
| 9. Debts and Obligations Owed BY the Constituent-Service Program and/or Elected Official (itemize all on Schedule D) | \$ 0.00 | \$ 0.00 | |
| 10. (a) Loans Owed BY the Constituent-Service Program and/or Elected Official (itemize all on Schedule E) | \$ 0.00 | \$ 0.00 | |
| (b) All Other Loans (itemize all on Schedule-E1) | \$ 0.00 | \$ 0.00 | |
| CERTIFICATIONS/OATHS AND AFFIRMATIONS OF FILERS OF REPORTS OF R PROGRAM | ECEIPTS AND EXPENDITURES | FOR A CONSTITUENT-SERVE | |
| (1) OATH OR AFFIRMATION OF ELECTED OFFICIAL IF FILING | | | |
| I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY, THE PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND FURTHER SWEAR OR AFFIRM THAT I USED ALL REASONABLE CONSTITUENT-SERVICE PROGRAM ESTABLISHED BY ME IS IN COMPIDISTRICT OF COLUMBIA CAMPAIGN FINANCE ACT OF 2011, AND HAIMPOSED ON CONTRIBUTORS BY THE CAMPAIGN FINANCE ACT. | BELIEF, THE REPORT IS TR DUE DILIGENCE TO EN LIANCE WITH THE REPORTIN | UE AND COMPLETE; AND I SURE THAT I AND THE NG REQUIREMENTS OF THE | |
| TYPE OR PRINT FULL NAME OF ELECTED OFFICIAL | | | |
| SIGNATURE OF ELECTED OFFICIAL | DATE | | |

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE ______DAY____OF____,20

| NOTARY PUBLIC | |
|--|-----------------------------|
| NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAPENALTIES OF D.C. OFFICIAL CODE § 1-1163.35. | Y SUBJECT THE PERSON TO THE |
| (2) OATH OR AFFIRMATION OF PROGRAM TREASURER | |
| I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED A PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE, CO | |
| Schannette L. Grant | |
| TYPE OR PRINT FULL NAME OF TREASURER | |
| | |
| ELECTRONICALLY CERTIFIED | 04/02/2018 |
| SIGNATURE OF TREASURER | DATE |
| SUBSCRIBED AND SWORN TO BEFORE ME THIS THE DAY OF ,20 | |
| | |
| NOTARY PUBLIC | |

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

DETAILED SUMMARY PAGE OF RECEIPTS AND EXPENDITURES FOR CONSTITUENT-SERVICE PROGRAMS

| 1. Full Name of Constituent-Service Program | REPORT | COVERING THE PERIC |)D | | |
|--|-----------------------------|-------------------------|-----|--------------------------------|-------|
| Evans Constituent Service Fund | FROM: 1/2/2018 TO: 4/1/2018 | | | 2018 | |
| I. RECEIPTS | | COLUMN A THIS PERIOD | CUM | COLUMN B ULATIVE YEAR-TO-DA | ATE |
| 11. CONTRIBUTIONS (EXCLUDING LOANS) FROM: | | | | | |
| (a) Itemized monetary contributions from other than the elected official (Schedule A) | \$ | 18,350.00 | \$ | 18,350.00 | 11(a) |
| (b) Itemized monetary contributions from the elected official (Schedule A-1) | \$ | 0.00 | \$ | 0.00 | 11(b) |
| (c) Contributions of personal property from other than the elected official (Schedule A-2) | \$ | 0.00 | \$ | 0.00 | 11(c) |
| (d) Contributions of Personal Property from the elected official (Schedule A-3) | \$ | 0.00 | \$ | 0.00 | 11(d) |
| (e) Transfers from Authorized Committees (Schedule A-4) | \$ | 0.00 | \$ | 0.00 | 11(e) |
| (f) Itemized Monetary Contributions in excess of \$10,000.00 from source not associated | \$ | 0.00 | \$ | 0.00 | 11(f) |
| with the Elected Official or CSP (Schedule A-7) (g) TOTAL Contributions- Excluding Loans (add lines 11(a) (b), (c), (d), (e) and (f) | \$ | 18,350.00 | \$ | 18,350.00 | 11(g) |
| 12. SALES AND COLLECTIONS (Schedule C) | \$ | 0.00 | \$ | 0.00 | 12 |
| 13. LOANS RECEIVED | | | | | |
| (a) Made or guaranteed by the elected Official and or CSP (Schedule E) | \$ | 0.00 | \$ | 0.00 | 13(a) |
| (b) All other Loans (Schedule E-1) | \$ | 0.00 | \$ | 0.00 | 13(b) |
| (c) TOTAL Loans (add Lines 13(a), and 13(b)) | \$ | 0.00 | \$ | 0.00 | 13(c) |
| 14. OTHER RECEIPTS (DIVIDENDS, INTEREST, etc.)(Schedule A-5) | \$ | 0.00 | \$ | 0.00 | 14 |
| 15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6) | \$ | 0.00 | \$ | 0.00 | 15 |
| 16 TOTAL DECEMPS (add Lines 11/6 12 12(a) 14 and 15) | \$ | 18,350.00 | \$ | 18,350.00 | 16 |
| 16. TOTAL RECEIPTS (add Lines 11(f), 12, 13(c), 14 and 15) II. EXPENDITURES | | | | | |
| 17. OPERATING EXPENDITURES (Schedule B) | \$ | 455.07 | \$ | 455.07 | 17 |
| | | | | | |
| 18. ALL OTHER EXPENDITURES (Schedule B-1) 19. LOAN REPAYMENTS: | \$ | 22,179.98 | \$ | 22,179.98 | 18 |
| (a) Loans made or guaranteed by the elected Official and/or Constituent Service | \$ | 0.00 | s | 0.00 | 19(a) |
| Program (Schedule E) | | | | | 17(a) |
| (b) All other Loans (Schedule E-1) | \$ | 0.00 | \$ | 0.00 | 19(b) |
| (c) TOTAL Loan Repayments (add Lines 19(a) and 19(b)) | \$ | 0.00 | \$ | 0.00 | 19(c) |
| 20. TOTAL EXPENDITURES (add Lines 17, 18, and 19(c)) | \$ | 22,635.05 | \$ | 22,635.05 | 20 |
| III. CASH SUMMARY | | | - | | |
| 21. CASH ON HAND AT BEGINNING OF REPORTING PERIOD | \$ | | | 167,716.39 |) |
| 22. TOTAL RECEIPTS THIS PERIOD (from Line 16) | \$ | | | 18,350.00 |) |
| 23. SUBTOTAL (add Lines 21 and 22) | \$ | | | 186,066.39 |) |
| 24. TOTAL EXPENDITURES THIS PERIOD (from Line 20) | \$ | | | 22,635.05 | 5 |
| 25. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 24 from Line 23) | \$ | | | 163,431.34 | |

OCF FORM 10 SCHEDULE A Page 1 of 11 for Line Number 11a

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|---|--|-------------------------------------|--|
| Full Name of Constituent-Service Program Evans Constituent Service Fund | | | |
| Full Name, Mailing Address and Zip Code Thomas A Sams 1744 Riggs Pl NW, Washington, DC 20009 Contributor Type Individual | Contribution Type □ Cash □ Money Order □ Check □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) Occupation International Trade Specialist Name and Address of Employer US Government | Date (month, day, year) 03/13/2018 | Amount of Each Receipt This Period \$ 25.00 |
| | Washington, DC Aggregate Year-To-date | | \$ 25.00 |
| 2. Full Name, Mailing Address and Zip Code Barbara F Kahlow 800 25th St NW Apt 704, Washington, DC 20037 Contributor Type Individual | Contribution Type Cash Money Order Cashier Check Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Name and Address of Employer Retired Washington, DC | Date (month, day, year) 03/13/2018 | Amount of Each Receipt This Period \$ 200.00 |
| | Aggregate Year-To-date | | \$ 200.00 |
| 3. Full Name, Mailing Address and Zip Code John M Derrick Jr. 5010 Warren St NW, Washington, DC 20016 | Contribution Type ☐ Cash ☐ Money Order ☐ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/13/2018 | Amount of Each Receipt This Period \$ 100.00 |
| Contributor Type Individual | Occupation President Name and Address of Employer PEPCO Washington, DC | | |
| | Aggregate Year-To-date | | \$ 100.00 |
| 4. Full Name, Mailing Address and Zip Code Betty Nyangoni 1905 Park Rd NW, Washington, DC 20010 | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/13/2018 | Amount of Each Receipt This Period \$ 100.00 |
| Contributor Type Individual | Occupation Name and Address of Employer Retired Washington, DC | | |
| | Aggregate Year-To-date | | \$ 100.00 |
| Full Name, Mailing Address and Zip Code Linda Lee 1315 Alps Dr, Mc Lean, VA 22102 | Contribution Type ☐ Cash ☐ Money Order ☐ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/13/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Individual | Occupation Retired Name and Address of Employer Self Washington, DC | _ | |

SCHEDULE A Page 2 of 11 ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL OCF FORM 10 for Line Number 11a

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions, or for commercial purposes. | | | |
|---|---|------------------------------------|--|
| Full Name of Constituent-Service Program | | | |
| Evans Constituent Service Fund | | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 6. Full Name, Mailing Address and Zip Code Robert Flanagan 5100 Nahant St, Bethesda, MD 20816 | Contribution Type ☐ Cash ☐ Money Order ☐ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/13/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Individual | Occupation President Name and Address of Employer Clark Enterprises 7500 Old Georgetown Rd, Bethesda, MD 20814 | | e 700 00 |
| | Aggregate Year-To-date | | \$ 500.00 |
| 7. Full Name, Mailing Address and Zip Code Peter Forster 5291 Partridge Ln NW, Washington, DC 20016 Contributor Type Individual | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) Occupation Name and Address of Employer | Date (month, day, year) 03/13/2018 | Amount of Each Receipt This Period \$ 500.00 |
| | | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 8. Full Name, Mailing Address and Zip Code Donna Hays 2234 Q St NW, Washington, DC 20008 Contributor Type Individual | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) Occupation Name and Address of Employer | Date (month, day, year) 03/13/2018 | Amount of Each Receipt This Period \$ 25.00 |
| | Name and Address of Employer | | |
| | Aggregate Year-To-date | | \$ 25.00 |
| 9. Full Name, Mailing Address and Zip Code Thomas Mitchell 3143 P St NW, Washington, DC 20007 | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/13/2018 | Amount of Each Receipt This Period \$ 250.00 |
| Contributor Type Individual | Occupation Retired Name and Address of Employer Self Washington, DC | - | |
| | Aggregate Year-To-date | | \$ 250.00 |
| | | | |

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|---|--|------------------------------------|--|
| Full Name of Constituent-Service Program Evans Constituent Service Fund | | | |
| 10. Full Name, Mailing Address and Zip Code Germar Properties 3286 M St NW, Washington, DC 20007 Contributor Type Business Business Type | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) Occupation Name and Address of Employer | Date (month, day, year) 03/13/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Corporation | Aggregate Year-To-date | | \$ 500.00 |
| 11. Full Name, Mailing Address and Zip Code Jack Olender 2500 Virginia Ave NW, Washington, DC 20037 Contributor Type Individual | Contribution Type ☐ Cash ☐ Money Order ☐ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) Occupation Attorney Name and Address of Employer | Date (month, day, year) 03/13/2018 | Amount of Each Receipt This Period \$ 500.00 |
| | Olender & Associates 888 17th St NW Fl 4, Washington, DC 20006 | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| Full Name, Mailing Address and Zip Code Kay Kendall Tracy Pl NW, Washington, DC 20008 | Contribution Type ☐ Cash ☐ Money Order ☐ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/13/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Individual | Occupation Real Estate Name and Address of Employer Self Washington, DC | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 13. Full Name, Mailing Address and Zip Code Douglas Development Corporation 702 H St NW Ste 400, Washington, DC 20001 | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/13/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Business Business Type | Name and Address of Employer | - | |
| Corporation | Aggregate Year-To-date | | \$ 500.00 |
| 14. Full Name, Mailing Address and Zip Code James Calomiris 5201B Wisconsin Ave NW, Washington, DC 20015 | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/21/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Individual | Occupation Managing Partner Name and Address of Employer Endeka Enterprises | - | |

OCF FORM 10 SCHEDULE A Page 4 of 11 for Line Number 11a ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions, or for commercial purposes. Full Name of Constituent-Service Program **Evans Constituent Service Fund** Aggregate Year-To-date \$ 500.00 15. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Alan Bubes** ☑ Check ☐ Cash ☐ Money Order day, year) Receipt This Period 1601 31st St NW, Washington, DC 20007 ☐ Credit Card ☐ Cashier Check 03/21/2018 \$ 500.00 ☐ Other (Specify) ☐ In Kind (Specify) Occupation Owner **Contributor Type** Individual Name and Address of Employer Linens of the Week 735 Lamont St NW, Washington, DC 20010 \$ 500.00 Aggregate Year-To-date 16. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Malcolm E Peabody ☐ Money Order ☑ Check ☐ Cash day, year) Receipt This Period 2811 Dumbarton St NW, Washington, DC 20007 ☐ Cashier Check ☐ Credit Card 03/21/2018 \$ 250.00 ☐ Other (Specify) ☐ In Kind (Specify) **Contributor Type** Occupation **Real Estate** Individual Name and Address of Employer **Peabody Corporation Real Estate Developers** Washington, DC Aggregate Year-To-date \$ 250.00 17. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Julio Haddock ☐ Cash ☐ Money Order ☑ Check day, year) Receipt This Period 509 H St SW, Washington, DC 20024 ☐ Cashier Check ☐ Credit Card 03/21/2018 \$ 150.00 ☐ Other (Specify) ☐ In Kind (Specify) Occupation Contributor Type Individual Name and Address of Employer **Capital Hotels & Suites** 2033 M St NW, Washington, DC 20036 \$ 150.00 Aggregate Year-To-date 18. Full Name, Mailing Address and Zip Code **Contribution Type** Amount of Each Date (month, Sylvan Gershowitz ☐ Money Order ☑ Check ☐ Cash Receipt This Period day, year) 1828 L St NW Ste 501, Washington, DC 20036 ☐ Cashier Check ☐ Credit Card \$ 250.00 03/21/2018 ☐ Other (Specify) ☐ In Kind (Specify) Executive Occupation **Contributor Type** Individual Name and Address of Employer Mounment Parking Company, Inc. Washington, DC Aggregate Year-To-date \$ 250.00

| any information copied from such Reports or Statem contributions, or for commercial purposes. | tents may not be sold or used by any person for the pur | pose of soliciting | |
|---|--|------------------------------------|--|
| Full Name of Constituent-Service Program Evans Constituent Service Fund | | | |
| 19. Full Name, Mailing Address and Zip Code Bart Gordon 2442 Belmont Rd NW, Washington, DC 20008 Contributor Type Individual | Contribution Type □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) Occupation Self | Date (month, day, year) 03/21/2018 | Amount of Each Receipt This Period \$ 250.00 |
| | Name and Address of Employer Attorney Aggregate Year-To-date | | \$ 250,00 |
| | Aggregate rear-10-date | | \$ 250.00 |
| Full Name, Mailing Address and Zip Code Thomas Wilbur 3503 Patterson St NW, Washington, DC 20015 | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/21/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Individual | Occupation Executive Name and Address of Employer Akridge Co. 601 13th St NW Ste 300N, Washington, DC 20005 | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 21. Full Name, Mailing Address and Zip Code Darryl Carter 1320 9th St NW, Washington, DC 20001 | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/21/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Individual | Occupation Interior Designer Name and Address of Employer Self-employed Washington, DC | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 22. Full Name, Mailing Address and Zip CodeWilliam Alsup III3019 44th St NW, Washington, DC 20016 | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/21/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Individual | Occupation Real Estate Name and Address of Employer Hines Development Corp 2345 Crystal Dr Ste 1100, Arlington, VA 22202 | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 23. Full Name, Mailing Address and Zip Code Mark Penn 3121 O St NW, Washington, DC 20007 | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/21/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Individual | Occupation Media Consultant Name and Address of Employer Penn Schoen, Berland 1110 Vermont Ave NW Ste 1200, Washington, DC 20005 | | |

OCF FORM 10 SCHEDULE A Page 6 of 11 for Line Number 11a

| contributions, or for commercial purposes. | ents may not be sold or used by any person for the purpo | ose of soliciting | |
|---|--|------------------------------------|--|
| Full Name of Constituent-Service Program Evans Constituent Service Fund | | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 24. Full Name, Mailing Address and Zip Code Nancy Penn 3121 O St., NW., Washington, DC 20007 | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) Occupation Home maker | Date (month, day, year) 03/21/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Individual | Name and Address of Employer Self Washington, DC | - | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 25. Full Name, Mailing Address and Zip Code Norman M Glasgow Jr. 10513 Alloway Dr, Potomac, MD 20854 Contributor Type Individual | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) Occupation Attorney | Date (month, day, year) 03/21/2018 | Amount of Each Receipt This Period \$ 500.00 |
| individuai | Name and Address of Employer Holland and Knight Washington, DC Aggregate Year-To-date | | \$ 500.00 |
| 26 F. H.N | | D (d | |
| 26. Full Name, Mailing Address and Zip Code John Davies 2412 Tracy Pl NW, Washington, DC 20008 Contributor Type | Contribution Type □ Cash □ Money Order □ Check □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) Occupation same | Date (month, day, year) 03/21/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Individual | Name and Address of Employer Self Washington, DC | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 27. Full Name, Mailing Address and Zip Code E. Allan Wendt 3234 Volta Pl NW, Washington, DC 20007 Contributor Type | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) Occupation Retired | Date (month, day, year) 03/23/2018 | Amount of Each Receipt This Period \$ 200.00 |
| Individual | Name and Address of Employer N/A Washington, DC | - | |
| | Aggregate Year-To-date | | \$ 200.00 |
| | | | |

| any information copied from such Reports or Statem contributions, or for commercial purposes. | ents may not be sold or used by any person for the pu | rpose of soliciting | |
|--|---|------------------------------------|--|
| Full Name of Constituent-Service Program | | | |
| Evans Constituent Service Fund | | | |
| 28. Full Name, Mailing Address and Zip Code Robert Haft 15441 Cross Keys Rd, Haymarket, VA 20169 | Contribution Type ☐ Cash ☐ Money Order ☐ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/23/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Individual | Occupation Name and Address of Employer | | |
| | Aggregate Year-To-date | • | \$ 500.00 |
| 29. Full Name, Mailing Address and Zip Code Mary Haft 15441 Cross Keys Rd, Haymarket, VA 20169 Contributor Type | Contribution Type ☐ Cash ☐ Money Order ☐ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) Occupation | Date (month, day, year) 03/23/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Individual | Name and Address of Employer | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 30. Full Name, Mailing Address and Zip Code Cheryle Wanner Doggett 1100 G St NW, Washington, DC 20005 | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/23/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Individual | Occupation Doggett Enterprises Name and Address of Employer Self | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 31. Full Name, Mailing Address and Zip Code David Dorros 4915 Glenbrook Rd NW, Washington, DC 20016 | Contribution Type ☐ Cash ☐ Money Order ☐ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/23/2018 | Amount of Each Receipt This Period \$ 250.00 |
| Contributor Type Individual | Occupation Name and Address of Employer CBRE 750 9th St SE Ste 900, Washington, DC 20003 | | |
| | Aggregate Year-To-date | | \$ 250.00 |
| 32. Full Name, Mailing Address and Zip Code Patricia Bitondo PO Box 32083, Washington, DC 20007 | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/23/2018 | Amount of Each Receipt This Period \$ 100.00 |
| Contributor Type Individual | Occupation Retired Name and Address of Employer Self Employed Washington, DC | | |

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|---|---|------------------------------------|--|
| Full Name of Constituent-Service Program Evans Constituent Service Fund | | | |
| | Aggregate Year-To-date | | \$ 100.00 |
| 33. Full Name, Mailing Address and Zip Code Albert H. Smalls 7116 Glenbrook Rd, Bethesda, MD 20814 Contributor Type | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) Occupation | Date (month, day, year) 03/23/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Individual | Name and Address of Employer Aggregate Year-To-date | | \$ 500.00 |
| | Aggregate Year-10-date | | \$ 500.00 |
| 34. Full Name, Mailing Address and Zip Code Giuseppe Cecchi 1700 N Moore St Ste 2020, Arlington, VA 22209 | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/23/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Individual | Occupation Developer Name and Address of Employer IDI Management Washington, DC | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 35. Full Name, Mailing Address and Zip Code Katherine B Bradley 2211 30th St NW, Washington, DC 20008 | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/23/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Individual | Occupation President Name and Address of Employer City Bridge Foundation 600 New Hampshire Ave NW, Washington, DC 20037 | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 36. Full Name, Mailing Address and Zip CodeIntrepid Eye St.1720 Eye St NW Ste 500, Washington, DC 20006 | Contribution Type ☐ Cash ☐ Money Order ☐ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/23/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Business Business Type Corporation | Occupation Name and Address of Employer | | |
| | Aggregate Year-To-date | <u> </u> | \$ 500.00 |
| | | | |

| Any information copied from such Reports or Stateme contributions, or for commercial purposes. | nts may not be sold or used by any person for the purp | oose of soliciting | |
|--|--|------------------------------------|--|
| Full Name of Constituent-Service Program Evans Constituent Service Fund | | | |
| 37. Full Name, Mailing Address and Zip Code Samuel Gerstenfeld 805 15th St NW, Washington, DC 20005 Contributor Type Individual | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Real Estate Name and Address of Employer Self | Date (month, day, year) 03/24/2018 | Amount of Each Receipt This Period \$ 500.00 |
| | Aggregate Year-To-date | | \$ 500.00 |
| 38. Full Name, Mailing Address and Zip Code John H Vogel 85 Bay Dr, Annapolis, MD 21403 Contributor Type | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) Occupation Attorney | Date (month, day, year) 03/28/2018 | Amount of Each Receipt This Period \$ 100.00 |
| Individual | Name and Address of Employer Patton Boggs 2550 M St NW, Washington, DC 20037 | | |
| | Aggregate Year-To-date | | \$ 100.00 |
| Full Name, Mailing Address and Zip Code Stephen A Goldberg 1615 M St NW, Washington, DC 20036 | Contribution Type ☐ Cash ☐ Money Order ☐ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/28/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Individual | Occupation Executive Name and Address of Employer Stephen A. Goldberg Washington, DC | | |
| | Aggregate Year-To-date | • | \$ 500.00 |
| 40. Full Name, Mailing Address and Zip Code John E Akridge 28181 Harleigh Ln, Oxford, MD 21654 Contributor Type | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) Occupation Executive | Date (month, day, year) 03/28/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Individual | Name and Address of Employer The John Akridge Companies 601 13th St NW Ste 300N, Washington, DC 20005 | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 41. Full Name, Mailing Address and Zip Code Joseph B Gildenhorn 2030 24th St NW, Washington, DC 20008 | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/28/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Individual | Occupation Partner Name and Address of Employer The JBG Companies 3300 Metzerott Road, Adelphi, MD 20783 | | |

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| | nents may not be sold or used by any person for the pur | | |
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| Full Name of Constituent-Service Program | | | |
| Evans Constituent Service Fund | | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 42. Full Name, Mailing Address and Zip Code Jeffrey Clark 1324 Corcoran St NW, Washington, DC 20009 Contributor Type | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) Occupation Associate Broker | Date (month, day, year) 03/28/2018 | Amount of Each Receipt This Period \$ 100.00 |
| Individual | Name and Address of Employer Jo Ricks 1906 18th St NW, Washington, DC 20009 | | |
| | Aggregate Year-To-date | | \$ 100.00 |
| 43. Full Name, Mailing Address and Zip Code G. William Calomiris 1112 16th St NW Ste 900, Washington, DC 20036 Contributor Type Individual | Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Name and Address of Employer Calomiris and Calomiris | Date (month, day, year) 03/28/2018 | Amount of Each Receipt This Period \$ 500.00 |
| | Washington, DC | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 44. Full Name, Mailing Address and Zip Code Morton Funger 1650 Tysons Blvd Ste 820, Mc Lean, VA 22102 Contributor Type Individual | Contribution Type □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) Occupation Developer Name and Address of Employer Self Washington, DC | Date (month, day, year) 03/28/2018 | Amount of Each Receipt This Period \$ 500.00 |
| | Aggregate Year-To-date | | \$ 500.00 |
| 45. Full Name, Mailing Address and Zip Code Theodore Pedas PO Box 9996, Washington, DC 20016 Contributor Type Individual | Contribution Type □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) Occupation Executive Name and Address of Employer Circle Management Company | Date (month, day, year) 03/28/2018 | Amount of Each Receipt This Period \$ 500.00 |
| | Washington, DC Aggregate Year-To-date | | \$ 500.00 |
| | | | |

OCF FORM 10 SCHEDULE A Page 11 of 11 for Line Number 11a

| contributions, or for commercial purposes. | nents may not be sold or used by any person for the | purpose of soliciting | |
|---|--|------------------------------------|--|
| Full Name of Constituent-Service Program Evans Constituent Service Fund | | | |
| 46. Full Name, Mailing Address and Zip Code James Pedas 4018 Brandywine St NW, Washington, DC 20016 Contributor Type | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) Occupation Same | Date (month, day, year) 03/28/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Individual | Name and Address of Employer Self Washington, DC | | |
| | Aggregate Year-To-date | | \$ 500.00 |
| 47. Full Name, Mailing Address and Zip Code Pfizer 6730 Lenox Center Ct, Memphis, TN 38115 | Contribution Type ☐ Cash ☐ Money Order ☑ Check ☐ Cashier Check ☐ Credit Card ☐ Other (Specify) ☐ In Kind (Specify) | Date (month, day, year) 03/28/2018 | Amount of Each Receipt This Period \$ 500.00 |
| Contributor Type Business Business Type | Occupation Name and Address of Employer | | |
| Corporation | Aggregate Year-To-date | | \$ 500.00 |
| | | | |
| TOTAL This Period (Aggregate of all Receipt page | es) | | \$ 18,350.00 |

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions, or for commercial purposes.

| Full Name of Constituent-Service Program | | | |
|---|---|-------------------------|---|
| Evans Constituent Service Fund | | | |
| 1. Full Name, Mailing Address and Zip Code Constant Contact 1601 Trapelo Road, Suite 329, | Purpose of Expenditure Computer and Web Expenses | Date (month, day, year) | Amount of Each Expenditure This Period |
| Waltham, MA 02451 | | 01/05/2018 | \$ 70.00 |
| 2. Full Name, Mailing Address and Zip Code Wells Fargo 1250 Pennsylvania Ave. NW, Washington, DC 20004 | Purpose of Expenditure Bank Fees | Date (month, day, year) | Amount of Each Expenditure This Period |
| | | 01/31/2018 | \$ 2.00 |
| 3. Full Name, Mailing Address and Zip Code Constant Contact 1601 Trapelo Road, Suite 329, | Purpose of Expenditure Computer and Web Expenses | Date (month, day, year) | Amount of Each Expenditure This Period |
| Waltham, MA 02451 | | 02/05/2018 | \$ 70.00 |
| 4. Full Name, Mailing Address and Zip Code Jack Evans 3141 P Street NW., Washington, DC 20007 | Purpose of Expenditure Catering/Refreshments | Date (month, day, year) | Amount of Each Expenditure This Period |
| 20007 | | 02/08/2018 | \$ 67.41 |
| 5. Full Name, Mailing Address and Zip Code Wells Fargo 1250 Pennsylvania Ave. NW, Washington, DC 20004 | Purpose of Expenditure Bank Fees | Date (month, day, year) | Amount of Each Expenditure This Period |
| Washington, DC 20004 | | 02/28/2018 | \$ 2.00 |
| 6. Full Name, Mailing Address and Zip Code Constant Contact 1601 Trapelo Road, Suite 329, Waltham, MA 02451 | Purpose of Expenditure Computer and Web Expenses | Date (month, day, year) | Amount of Each Expenditure This Period |
| , | | 03/06/2018 | \$ 70.00 |
| 7. Full Name, Mailing Address and Zip Code Jack Evans 3141 P Street NW., Washington, DC | Purpose of Expenditure Catering/Refreshments | Date (month, day, year) | Amount of Each Expenditure This Period |
| 20007 | | 03/15/2018 | \$ 171.66 |
| 8. Full Name, Mailing Address and Zip Code Wells Fargo 1250 Pennsylvania Ave. NW, Washington, DC 20004 | Purpose of Expenditure Bank Fees | Date (month, day, year) | Amount of Each Expenditure This Period |
| washington, DC 20004 | | 03/31/2018 | \$ 2.00 |

ALL OTHER EXPENDITURES Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions, or for commercial purposes. Full Name of Constituent-Service Program **Evans Constituent Service Fund** 1. Full Name, Mailing Address and Zip Code Purpose of Expenditure Date Amount of Each Ready Refresh (month, day, **Expenditure This Period** PO Box 856192, Louisville, KY 40285 Office Water year) 01/17/2018 \$108.29 2. Full Name, Mailing Address and Zip Code Purpose of Expenditure Date Amount of Each **Expenditure This Period OFTON** (month, day, 1901 Mississippi Avenue SE, Sponsorship of Event year) Washington, DC 20018 01/17/2018 \$ 150.00 3. Full Name, Mailing Address and Zip Code Purpose of Expenditure Date Amount of Each (month, day, Expenditure This Period 301 C Street NW, Washington, DC **Local Travel** year) 20001 01/17/2018 \$ 200.00 Date Amount of Each 4. Full Name, Mailing Address and Zip Code Purpose of Expenditure **Expenditure This Period** (month, day, Caruso Florist 1717 M Street NW, Washington, DC **Constituent flowers** year) 20036 01/17/2018 \$ 81.95 5. Full Name, Mailing Address and Zip Code Purpose of Expenditure Amount of Each Date **Expenditure This Period** (month, day, 1221 Avenue of the Americas, New **Membership Dues** year) York, NY 10020 02/01/2018 \$ 135.00 6. Full Name, Mailing Address and Zip Code Purpose of Expenditure Date Amount of Each **Expenditure This Period** Wall Street Journal (month, day, 12311 Avenue of the Americas, New year) Yearly subscription York, NY 10036 02/02/2018 \$ 469.40 7. Full Name, Mailing Address and Zip Code Purpose of Expenditure Date Amount of Each (month, day, Washington Nationals **Expenditure This Period** 1500 S. Capitol Street, SE, Tickets year) Washington, DC 20003 02/05/2018 \$ 8,288.50 8. Full Name, Mailing Address and Zip Code Amount of Each Purpose of Expenditure Date **Action Courier** (month, day, **Expenditure This Period** PO Box 23380, Alexandria, VA 22304 Courier services year) 02/08/2018 \$ 39.80 Amount of Each 9. Full Name, Mailing Address and Zip Code Purpose of Expenditure Date (month, day, **Expenditure This Period** 1250 H Street NW, Washington, DC Office supplies year) 20005 03/02/2018 \$860.00 10. Full Name, Mailing Address and Zip Code Purpose of Expenditure Date Amount of Each (month, day, **Expenditure This Period DC Public Library Foundation** 1990 K Street NW, Washington, DC Sponsorship of event year) 20006 03/15/2018 \$ 150.00 11. Full Name, Mailing Address and Zip Code Purpose of Expenditure Date Amount of Each Metropolitan Washington Council AFL-CIO (month, day, **Expenditure This Period** 815 16th Street NW 3rd Floor, Purchase of Ad year) Washington, DC 20006 03/15/2018 \$ 500.00 12. Full Name, Mailing Address and Zip Code Amount of Each Purpose of Expenditure Date (month, day, **Expenditure This Period** 1365 Wisconsin Ave NW Suite 200, Annual membership dues year) Washington, DC 20007

03/15/2018

\$ 55.00

| 13. Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
|---|------------------------|--------------|-------------------------|
| Ready Refresh | 0.00 | (month, day, | Expenditure This Period |
| PO Box 856192, Louisville, KY 20485 | Office water | year) | |
| | | 03/15/2018 | \$ 23.26 |
| 4. Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
| Staples | | (month, day, | Expenditure This Period |
| 1250 H Street NW, Washington, DC | Office supplies | year) | |
| 20005 | | 03/23/2018 | \$ 68.78 |
| 5. Full Name, Mailing Address and Zip Code | Purpose of Expenditure | Date | Amount of Each |
| Washington Wizards | | (month, day, | Expenditure This Period |
| 601 F Street NW, Washington, DC | Tickets | year) | |
| 20004 | | 03/28/2018 | \$ 11,050.00 |
| | <u> </u> | 03/20/2010 | \$ 11,030.00 |
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| TOTAL This Period (aggregate the subtotal o | | | \$ 22,179.98 |